

## Application Data Sheet

### Application Information

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title::  
PEPTIDE INHIBITING PLATELET  
DERIVED GROWTH FACTOR (PDGF-BB)  
AND FIBROBLAST GROWTH FACTOR  
(BFGF) ACTIVITY  
Attorney Docket Number:: 2507-1003  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 7  
Small Entity?:: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ITALY  
Status:: Full Capacity  
Given Name:: ANTONIO  
Middle Name::  
Family Name:: FACCHIANO  
City of Residence:: ROMA  
State or Province of  
Residence::  
Country of Residence:: ITALY  
Street of Mailing Address:: VIA G. BONI, 20 - INT. B-9

City of Mailing Address:: ROMA  
State or Province of Mailing Address::  
Country of Mailing Address:: ITALY  
Postal or Zip Code of Mailing Address:: I-00162

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ITALY  
Status:: Full Capacity  
Given Name:: FRANCESCO  
Middle Name::  
Family Name:: FACCHIANO  
City of Residence:: ROMA  
State or Province of  
Residence::  
Country of Residence:: ITALY  
Street of Mailing Address:: VIA FRAMURA, 45

City of Mailing Address:: ROMA  
State or Province of Mailing Address::  
Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-00168

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ITALY  
Status:: Full Capacity  
Given Name:: ANGELO  
Middle Name::  
Family Name:: FACCHIANO  
City of Residence:: NAPOLI  
State or Province of  
Residence::  
Country of Residence:: ITALY  
Street of Mailing Address:: VIA MARCO AURELIO SEVERINO, 38  
  
City of Mailing Address:: NAPOLI  
State or Province of Mailing Address::  
Country of Mailing Address:: ITALY  
Postal or Zip Code of Mailing Address:: I-80137

**Correspondence Information**

Correspondence Customer 000466  
Number::

**Representative Information**

Representative Customer	000466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
ITALY	RM2001A000088	2/21/01	Yes

**Assignment Information**

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::